

## PUBLIC SWIMMING POOL INSPECTION REPORT **DEPARTMENT OF HEALTH**

202551

				255	1334
ESTABLISHMENT	FIELD NO.	CO. NO.	DATE		
				SCORE	ki Nede
LOCATION	EST. NO.		STAFF ID	OUUTIL	
					/100
CITY, STATE, ZIP	TYPE ( ) A		PURPOSE (	) 1. Complete ) 2. Follow-up	( ) 4. Consultation ( ) 5. Investigation
	( ) (		(	) 3. Complaint	( ) 6. Other
PERMITTEE	FOLLOW-UP REQUIRED	( ) YES ( ) NO	INSP LENGTH (Hrs, Min)		
DHIVOICAL FACILITIES					
PHYSICAL FACILITIES  Bathhouse: floors and walls clean			R QUALITY		4

1.	Bathhouse: floors and walls clean	1
2.	Plumbing fixtures clean, operating properly	1
3.	Toilet tissue in holder, soap, single service towel, air dryer, mirrors nonbreakable	1
4.	Bathhouse facilities litter free, approved containers	1
5.	Adequate lighting, ventilation	2
6.	Pool facilities: walls, bottom, decking, walks, fixtures, equipment clean and in good repair	2

## SAFETY

* 7.	Certified lifeguard(s), number, lifeguard chair, number	4
* 8.	Chemical storage, handling	4
* 9.	Personnel, patrons with communicable diseases restricted	4
*10.	Depth markers, diving boards, towers, fencing	4
*11.	Electrical	4
*12.	Gas chlorination	4
*13.	General safety: no broken bottles, cans, glass, sharp objects	4
*14.	Illumination, adequate	4
*15.	Lifeline adequate, constructed, approved material	4
*16.	Lifesaving equipment, adequate	4
*17.	Main drain, signs, starting blocks, steps, ladders	4
*18.	Telephone	4

*19.	Bacteriological test results positive	4
20.	pH range, total alkalinity, cyanuric acid level	2
*21.	Absence of approved sanitizing residual	4
22.	Sanitizing residual: (ppm), approved chemical test kit	2
*23.	Approved sanitizing, disinfecting methods	4
*24.	Visual test, excessive turbidity	4
25.	Algae control	2
26.	No foreign material	2
27.	Water level maintained	2
*28.	Water temperature	4
29.	Non-breakable thermometer (Type D pools)	2

## WATER, WASTE WATER

*30.	Cross connection(s)	4
*31.	Sewage disposal	4
*32.	Water supply, source, approved	4

## **ADMINISTRATION**

** 33.	Current permit posted	0
** 34.	Most current inspection report posted	0

<sup>\* =</sup> Identifies critical items

Failure to correct any violations of critical items within ten (10) days may result in suspension of your public swimming pool permit. Repeated violation of identical critical item category may result in revocation of your public swimming pool permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the swimming pool permit and the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filling a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. Sections 68-14-305, 68-14-307, 68-14-308, 68-14-317, 68-14-318, and 4-5-320.

REMARKS		
THE RESERVE OF THE PARTY OF THE		
Signature of Person in Charge	By	Environmentalist
Date of Signature	Time in / out	a.m. Dist. List  1st — Local File  p.m. 2nd — Date Entry  3rd — Operator, Manager

<sup>\*\* =</sup> Identifies misdemeanor violations